

County: Sheboygan  
SHEBOYGAN PROGRESSIVE CARE CENTER  
1902 MEAD AVENUE

Facility ID: 4100

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SHEBOYGAN 53081 Phone: (920) 458-8333  
Operated from 1/1 To 12/31 Days of Operation: 366  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/00): 122  
Total Licensed Bed Capacity (12/31/00): 152  
Number of Residents on 12/31/00: 104

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Average Daily Census: 104

Corporation  
Skilled  
No  
Yes  
104

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	52.9
Supp. Home Care-Personal Care	No					1 - 4 Years	42.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.6	More Than 4 Years	4.8
Day Services	No	Mental Illness (Org./Psy)	33.7	65 - 74	13.5		
Respite Care	No	Mental Illness (Other)	1.9	75 - 84	40.4		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	1.0	85 - 94	33.7	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.0	95 & Over	2.9	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.9			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	6.7		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	6.7	65 & Over	90.4		
Transportation	No	Cerebrovascular	7.7			RNs	9.0
Referral Service	No	Diabetes	1.0	Sex	%	LPNs	7.7
Other Services	No	Respiratory	0.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	37.5	Male	46.2	Aides & Orderlies	
Mentally Ill	No			Female	53.8		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay		Managed Care			Total	Percent Of All Residents	
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%			Per Diem Rate
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	5	100.0	\$160.03	59	86.8	\$103.10	0	0.0	\$0.00	30	100.0	\$132.35	1	100.0	\$169.26	95	91.3%
Intermediate	---	---	---	9	13.2	\$85.73	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	9	8.7%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	5	100.0		68	100.0		0	0.0		30	100.0		1	100.0		104	100.0%

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	14.3	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	1.9	Bathing	1.9	69.2	28.8	104
Other Nursing Homes	3.9	Dressing	12.5	66.3	21.2	104
Acute Care Hospitals	75.3	Transferring	28.8	49.0	22.1	104
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	22.1	55.8	22.1	104
Rehabilitation Hospitals	0.6	Eating	60.6	28.8	10.6	104
Other Locations	3.9	*****				
Total Number of Admissions	154	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	6.7	Receiving Respiratory Care		2.9
Private Home/No Home Health	27.0	Occ/Freq. Incontinent of Bladder	53.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	5.3	Occ/Freq. Incontinent of Bowel	24.0	Receiving Suctioning		0.0
Other Nursing Homes	7.9			Receiving Ostomy Care		1.9
Acute Care Hospitals	3.3	Mobility		Receiving Tube Feeding		2.9
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	6.7	Receiving Mechanically Altered Diets		29.8
Rehabilitation Hospitals	0.0					
Other Locations	6.6	Skin Care		Other Resident Characteristics		
Deaths	50.0	With Pressure Sores	3.8	Have Advance Directives		23.1
Total Number of Discharges		With Rashes	4.8	Medications		
(Including Deaths)	152			Receiving Psychoactive Drugs		57.7
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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	Ownership:			Bed Size:		Licensure:		All
	This Facility	Peer Group	Ratio	100-199	Ratio	Peer Group	Ratio	Facilities
Occupancy Rate: Average Daily Census/Licensed Beds	68.4	82.5	0.83	83.6	0.82	84.1	0.81	84.5
Current Residents from In-County	87.5	83.3	1.05	86.1	1.02	83.5	1.05	77.5
Admissions from In-County, Still Residing	33.8	19.9	1.70	22.5	1.50	22.9	1.48	21.5
Admissions/Average Daily Census	148.1	170.1	0.87	144.6	1.02	134.3	1.10	124.3
Discharges/Average Daily Census	146.2	170.7	0.86	146.1	1.00	135.6	1.08	126.1
Discharges To Private Residence/Average Daily Census	47.1	70.8	0.67	56.1	0.84	53.6	0.88	49.9
Residents Receiving Skilled Care	91.3	91.2	1.00	91.5	1.00	90.1	1.01	83.3
Residents Aged 65 and Older	90.4	93.7	0.96	92.9	0.97	92.7	0.97	87.7
Title 19 (Medicaid) Funded Residents	65.4	62.6	1.04	63.9	1.02	63.5	1.03	69.0
Private Pay Funded Residents	28.8	24.4	1.18	24.5	1.18	27.0	1.07	22.6
Developmentally Disabled Residents	0.0	0.8	0.00	0.8	0.00	1.3	0.00	7.6
Mentally Ill Residents	35.6	30.6	1.16	36.0	0.99	37.3	0.95	33.3
General Medical Service Residents	37.5	19.9	1.88	21.1	1.78	19.2	1.95	18.4
Impaired ADL (Mean)	48.1	48.6	0.99	50.5	0.95	49.7	0.97	49.4
Psychological Problems	57.7	47.2	1.22	49.4	1.17	50.7	1.14	50.1
Nursing Care Required (Mean)	5.8	6.2	0.94	6.2	0.93	6.4	0.90	7.2